PTO/SB/06 (08-00)
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U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number, Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD LES LAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 2) (Column 1) NUMBER EXTRA RATE NUMBER FILED **RATE** FEE FEE BASIC FEE \$ (37 CFR 1.16(a)) TOTAL CLAIMS x \$9.00 minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAIMS minus 3 = (37 CFR 1.16(b)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR OR TOTAL TOTAL \* If the difference in column 1 is less then zero, enter "0" in column 2 OTHER THAN CLAIMS AS AMENDED - PART II SMALL ENTITY SMALL ENTITY (Column 2) (Column 3) (Column 1) **CLAIMS** HIGHEST ADDI-ADDI-PRESENT REMAINING NUMBER **RATE** TIONAL RATE TIONAL AMENDMENT **EXTRA AFTER PREVIOUSLY** FEE FEE AMENDMENT PAID FOR OR Total = Minus (37 CFR 1.16(c)) OR \*\*\* Independent Minus (37 CFR 1.16(b)) OR (37 CFR 1.16(d)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 2) (Column 3) (Column 1)

		(00121111111)								
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	_	1		OR	v \$ =	
	(37 CFR 1.16(c))		Minus		] _	x 2 =	1	ΩD	ΑΨ	
	Independent	*	Minus	***	=	x=		OR OR	x =	
	(37 G K 1.10(0))	<u> </u>	L	<u> </u>	L					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+=		OR	+=	
		(Cohimn 1)		(Cohumn 2)	(Cohman 3)	TOTAL ADDIT. FEE		ORA	TOTAL DDIT. FEE	

(Column 1)			(Column 2)	(Column 3)	Al	DDIT. FEE		ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	= -	Ш				x \$=	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	][	x =		OR OR	x =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ =		OR	+ =	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							TOTAL DDIT. FEE		OR A	TOTAL DDIT. FEE	

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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<sup>\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".





Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

CLAIMS AS FILED - PART I (Column 1) (Column 2)							ENTITY	OR		R THAN ENTITY
FOR NUMBER FILED NUMBER EXT				EXTRA	RATE	FEE		RATE	FEE	
BASIC FEE						2.1	395.00	OR		790.00
TOTAL CLAIMS						x\$11≒		OR	x\$22=	902
INDE	EPENDENT CL	AIMS	9 mini	us 3 =   * . (		x41=		OR	x82=	400
MULTIPLE DEPENDENT CLAIM PRESENT								OR	+270=	12
* If the difference in column 1 is less than zero, enter *0* in column 2								OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER SMALL ENTITY OR SMALL E			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	. 60	Minus	·6/	=	x\$11=		OR	x\$22=	
ME	Independent	. •//	Minus	*** 9	=	x41=		OR	x82=	
	FIRST PRE	+135=		OR	+270=					
	(Column 1) (Column 2) (Column 3)							OR TOTAL ADDIT. FEE		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
AME	Independent	*	Minus	***	=	x41=		OR	x82=	
4	FIRST PRE	+135=		OR	+270=					
(Column 1) (Column 2) (Column 3)						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
AMENDMENT C	Ť	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	x\$11=		OR	x\$22=	
	Independent	*	Minus	***	=	x41=		OR	x82=	
		SENTATION OF	+135=		OR	+270=				
*** f	the "Highest Nun the "Highest Nun	nber Previously Pa nber Previously Pa	id For" IN THIS id For" IN THIS	mn 2, write "0" in colo S SPACE is less than S SPACE is less than Independent) is the l	20, enter "20."	TOTAL ADDIT. FEE	rists hov in		TOTAL ADDIT. FEE	